

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: Nevada

A. The following charges are imposed on the medically needy for services: N/A

Service	Type of Charge			Amount and Basis for Determination
	Deduct.	Coins.	Copay.	

TN No. 86-6  
Supersedes  
TN No. N/A

Approval Date APR 8 1986

Effective Date 7/1/85

HCFA ID: 0053C/0061E

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: Nevada

B. The method used to collect cost sharing charges for medically needy individuals: N/A

☐ Providers are responsible for collecting the cost sharing charges from individuals.

☐ The agency reimburses providers the full Medicaid rate for services and collects the cost sharing charges from individuals.

C. The basis for determining whether an individual is unable to pay the charge, and the means by which such an individual is identified to providers, is described below:

TN No. 86-6  
Supersedes  
TN No. N/A

Approval Date APR 8 1986

Effective Date 7/1/85

HCFA ID: 0053C/0061E

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: Nevada

N/A D. The procedures for implementing and enforcing the exclusions from cost sharing contained in 42 CFR 447.53(b) are described below:

N/A E. Cumulative maximums on charges:

☒ State policy does not provide for cumulative maximums.

☒ Cumulative maximums have been established as described below:

TN No. 86-6  
Supersedes  
TN No. N/A

Approval Date APR 8 1986

Effective Date 7/1/85

HCFA ID: 0053C/0061E